Schedule Numbers

45-1=Receipts from locations outside NH

45-2=Receipts from locations within NH

45-4=Sales and transfers out of state

45-5= Tax Paid Purchases

STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY ROAD TOLL BUREAU

33 Hazen Drive, Concord NH 03305 (603) 271-2311

Month of	, Yr
Schedule No	
License No	

OIL DISCHARGE & POLLUTION CONTROL DELIVERY SCHEDULE

Delivery Date	Transporter Name	Supplier Name	Origin (State)	Customer/Purchaser Name-Address	Product Type	Quantity
TOTAL:						

INSTRUCTIONS FOR COMPLETING RT-45

This document is prepared and distributed as required by RSA 146 and shall be designated as form RT-45. It is to be completed by the licensee or his authorized representative and shall include the following information:

- 1. The month and year for which the report is being filed;
- 2. The proper schedule number;
- 3. Licensees' license number;
- 4. A separate RT-45 must be prepared for each product type;
- 5. Each delivery or sale is to be listed separately showing date, transporter, supplier, customer's/purchaser's name and address and quantity. The term "various" for any of these items is not acceptable.
- 6. The total of the gallons for each page is to be shown. If more than one page is needed to list a particular product, the final page for that product will contain the total amount to be forwarded to the report cover page (RT-51).

Tabulated computer listings containing all the above data may be used, but must be attached to the proper fund delivery schedule.